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**HAND CARRY**

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## CURRENT CORRESPONDENCE ADDRESS

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTY'S DOCKET NO.	CONFIRMATION NO.
10/806,415	03/23/2004	Chrisantha Hugh Senanayake	4821-535-999	2292

## TITLE OF INVENTION      METHODS OF TREATING OR PREVENTING PAIN USING SIBUTRAMINE METABOLITES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	No	\$1400 (large) \$700 (small)	\$300.00	\$1,700.00	08/05/2005

EXAMINER	ART UNIT	CLASS-SUB CLASS
BARTS, SAMUEL	1621	514-646000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed

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2.

3.

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

### (A) NAME OF ASSIGNEE:

Sepracor Inc.

### (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Marlborough, MA

Please check the appropriate assignee category or categories (will not be printed on the patent)

Individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

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Issue Fee

A check in the amount of the fee(s) enclosed

Publication Fee

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(Authorized Signature)

(Date)

08/04/2005

Attorney Hoon Choi (Limited Recog No. L0209)

For Anthony M. Insogna (Reg. No. 35,203)

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